

POSITION	INITIALS	ID NO.	DATE
FEED DETERMINATION	<i>Ca</i>		
O.I.P.E. CLASSIFIER		<i>12</i>	<i>9/12</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>67503</i>	<i>10-27-00</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	✓	10/18/03
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
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If more than 150 claims or 10 actions  
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